



NPAIHB

Indian Leadership for Indian Health

Trauma and Addiction in Indian Country

April 11th 2019

Indian Country
Opioid Response
Community of
Learning



Today's Agenda...

1. *Introduction*
2. *Didactic Presentation:*
 - i. *“Trauma & Addiction in Indian Country” by Danica Brown, PhD, MSW, Northwest Portland Area Indian Health Board*
3. *Discussion/ Q&A*
4. *NW TOR Consortium Monthly Call*





LITTLE TURTLE He led the Miami and their allies to defeat the U.S. in two major battles during the 1790s, then later abandoned peace through diplomacy.
TECUMSEH An Shawnee chief, he organized Indian resistance to the westward expansion of the United States, and was killed at the Battle of the River of 1811.
SEQUOYAH In 1821 he developed a system of writing the Cherokee language, and became the first American to invent a written language.
RED JACKET A Seneca orator and chief, he was a prominent leader of the Red Jacket band of the Seneca tribe.
SITTING BULL A Lakota warrior, he was a prominent leader of the Great Sioux War of 1861-62.
JIM THORPE A member of the Five Civilized Tribes, he was a professional athlete in both the Olympics and professional sports in the 1910s. He was killed in a plane crash and baseball game.
NAVAJO CODE TALKERS During World War II, Navajo men used their native language to create an unbreakable code for U.S. forces in the South Pacific.
ELIZABETH PERATROVICH A Tsalal woman who was the first Native American woman to be elected to the U.S. House of Representatives.
N. SCOTT MOMADAY In 1971 he became the first Native American to be elected to the U.S. House of Representatives.
JOE DE LA CRUZ In 1971 he became the first Native American to be elected to the U.S. House of Representatives.
WILMA MANKILLER She was the first Native American woman to be elected to the U.S. House of Representatives.
VINE DELORIA, JR. An author, speaker, and activist, he was a prominent leader of the American Indian Movement.
OREN LYONS An American Indian orator and chief, he was a prominent leader of the Ojibwa tribe.
WINONA LADUKE The Anishinabe activist is working to increase the role of the White Earth Reservation, to free and 2000-year-old U.S. Vice President on the Green Party ticket.
JOHN ECHOWAK Since 1977 he has been a prominent leader of the Navajo American Indian Movement.
SHERMAN ALEXIE A member of the Spokan tribe, he was a prominent leader of the American Indian Movement.



Introductions...

Please introduce yourself:

- Name and Role
- Organization
- Location

Indian Country

NATIONAL GEOGRAPHIC
 What is Indian Country? For five centuries the question has been contested on battlefields, legislated in Congress, and studied in classrooms—yet today the debate burns with new fire. The U.S. government generally defines Indian Country as the roughly 56 million acres that lie within the boundaries of reservations and other lands it recognizes as belonging to American Indians and Alaska Natives. But the borders blur under a morass of multiple ownership and conflicts over sovereignty. Also complicating the picture, some 2.5 million people now define themselves solely as Indians or Alaska Natives, most of whom live beyond the confines of reservations. As they gain economic and political clout, they're changing the face of the nation.

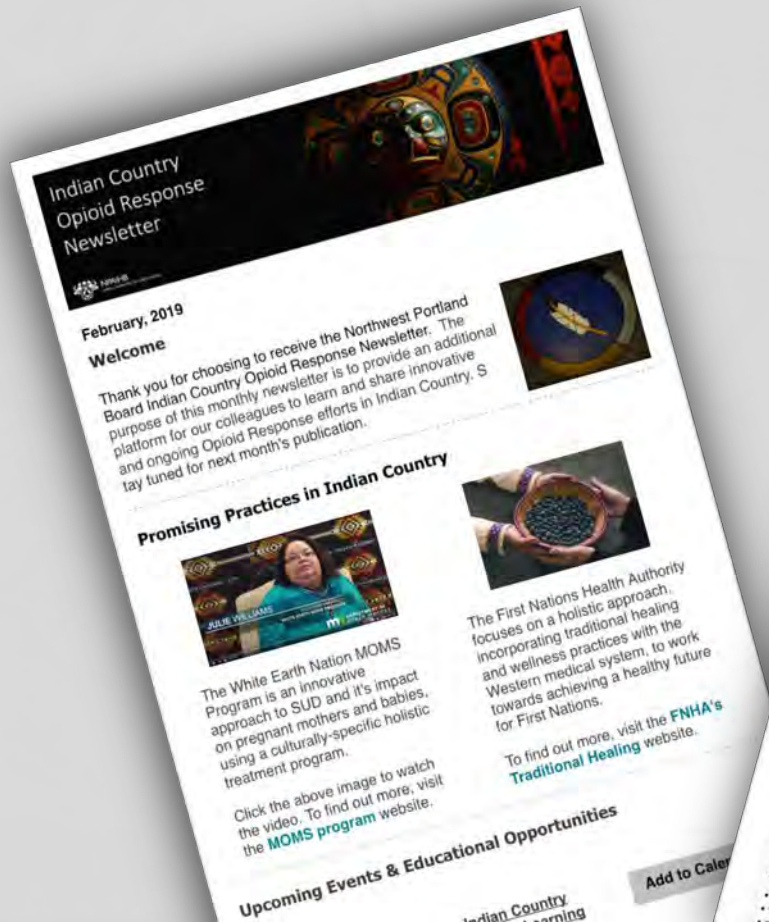


LONG HISTORY OF LOSING GROUND



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The didactic presentations will begin shortly...

Please Excuse This Interruption...



NPAIHB
Indian Leadership for Indian Health

Trauma and Addiction in Indian Country

Danica Love Brown, PhD, MSW, CACIII

Choctaw Nation of Oklahoma

Northwest Portland Area Indian Health Board

Behavioral Health Manager

Objectives

- Overview of trauma
- Overview of addiction
- Harm reduction
- Treatment modalities

What is trauma?

A dramatic, dark sky with a bright lightning bolt striking down, symbolizing trauma. The lightning bolt is the central focus, with several smaller bolts branching out from it. The sky is filled with dark, heavy clouds, and the overall atmosphere is one of intense power and danger.

Is an extraordinary psychological experience caused by treats to life and body or personal encounters with violence or death

- Disasters: natural
- Atrocities: human

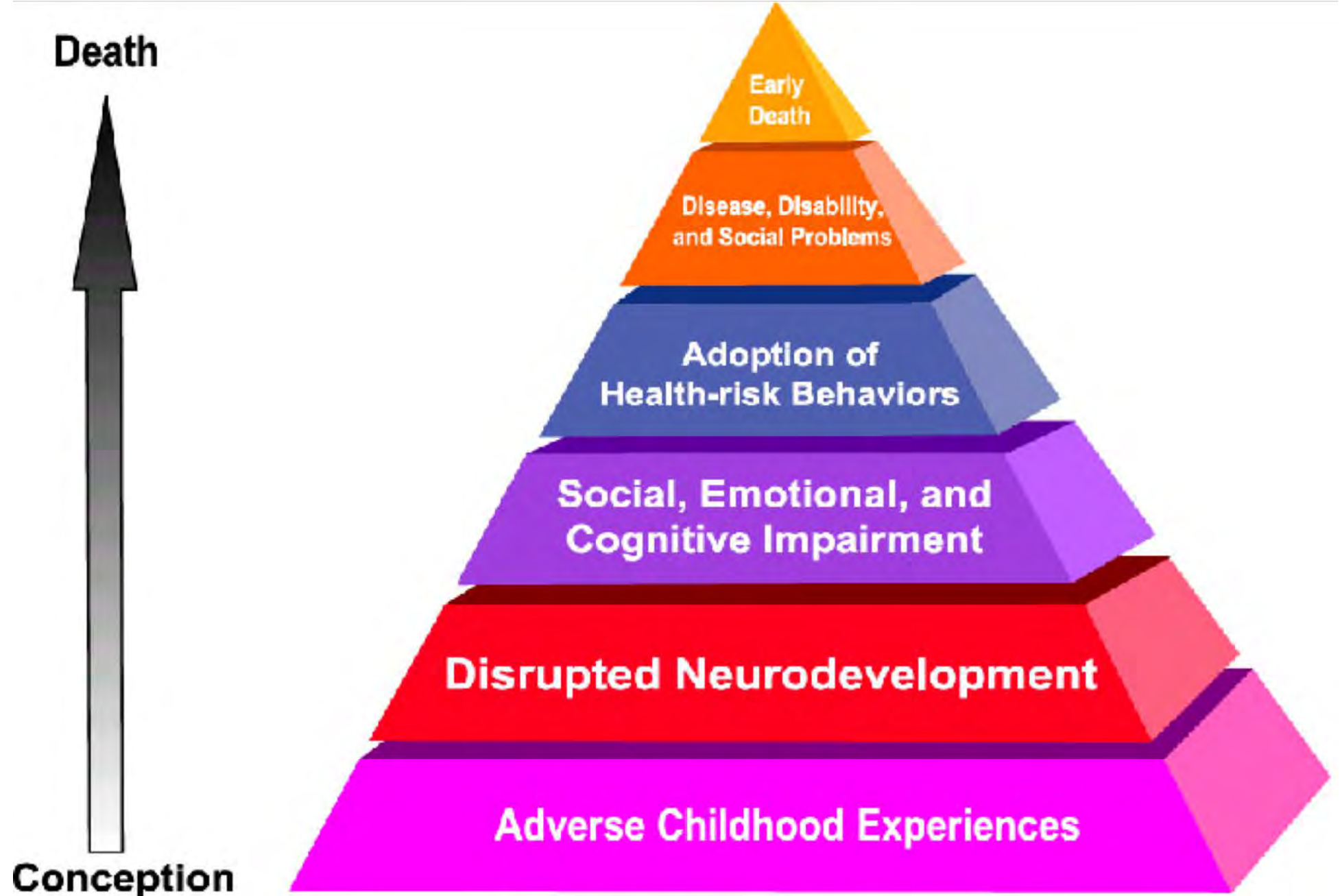
Types of trauma

- Acute trauma
- Repetitive trauma
- Complex trauma
- Developmental trauma
- Vicarious trauma
- Cultural, Historical and/or Intergenerational trauma

ACES Study

The Division of Violence Prevention at the Centers for Disease Control and Prevention (CDC), in partnership with Kaiser Permanente, conducted a landmark ACE study from 1995 to 1997 with more than 17,000 participants.

- 28% of study participants reported physical abuse and 21% reported sexual abuse
- Almost 40% of the Kaiser sample reported two or more ACEs and 12.5% experienced four or more



Death

Conception

Early Death

Disease, Disability, and Social Problems

Adoption of Health-risk Behaviors

Social, Emotional, and Cognitive Impairment

Disrupted Neurodevelopment

Adverse Childhood Experiences

Mechanisms by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

Adverse Childhood Experience* ACE Categories (Birth to 18)	Impact of Trauma and Health Risk Behaviors to Ease the Pain	Long-Term Consequences of Unaddressed Trauma (ACEs)
<p>Abuse of Child</p> <ul style="list-style-type: none"> ● Emotional abuse ● Physical abuse ● Contact Sexual abuse <p>Trauma in Child's Household Environment</p> <ul style="list-style-type: none"> ● Alcohol and/or Drug User ● Chronically depressed, emotionally disturbed or suicidal household member ● Mother treated violently ● Imprisoned household member ● Not raised by both biological parents (Loss of parent – best by death unless suicide, - Worst by abandonment) <p>Neglect of Child</p> <ul style="list-style-type: none"> ● Physical neglect ● Emotional neglect <p>* Above types of ACEs are the “heavy end” of abuse. *1 type = ACE score of 1</p>	<p>Neurobiologic Effects of Trauma</p> <ul style="list-style-type: none"> ● Disrupted neuro-development ● Difficulty controlling anger-rage ● Hallucinations ● Depression - other MH Disorders ● Panic reactions ● Anxiety ● Multiple (6+) somatic problems ● Sleep problems ● Impaired memory ● Flashbacks ● Dissociation <p>Health Risk Behaviors</p> <ul style="list-style-type: none"> ● Smoking ● Severe obesity ● Physical inactivity ● Suicide attempts ● Alcoholism ● Drug abuse ● 50+ sex partners ● Repetition of original trauma ● Self Injury ● Eating disorders ● Perpetrate interpersonal violence 	<p>Disease and Disability</p> <ul style="list-style-type: none"> ● Ischemic heart disease ● Cancer ● Chronic lung disease ● Chronic emphysema ● Asthma ● Liver disease ● Skeletal fractures ● Poor self rated health ● Sexually transmitted disease ● HIV/AIDS <p>Serious Social Problems</p> <ul style="list-style-type: none"> ● Homelessness ● Prostitution ● Delinquency, violence, criminal ● Inability to sustain employment ● Re-victimization: rape, DV, bullying ● Compromised ability to parent ● Negative alterations in self perceptions and relationships with others ● Altered systems of meaning ● Intergenerational trauma ● Long-term use of multiple human service systems

Hebb's Law:

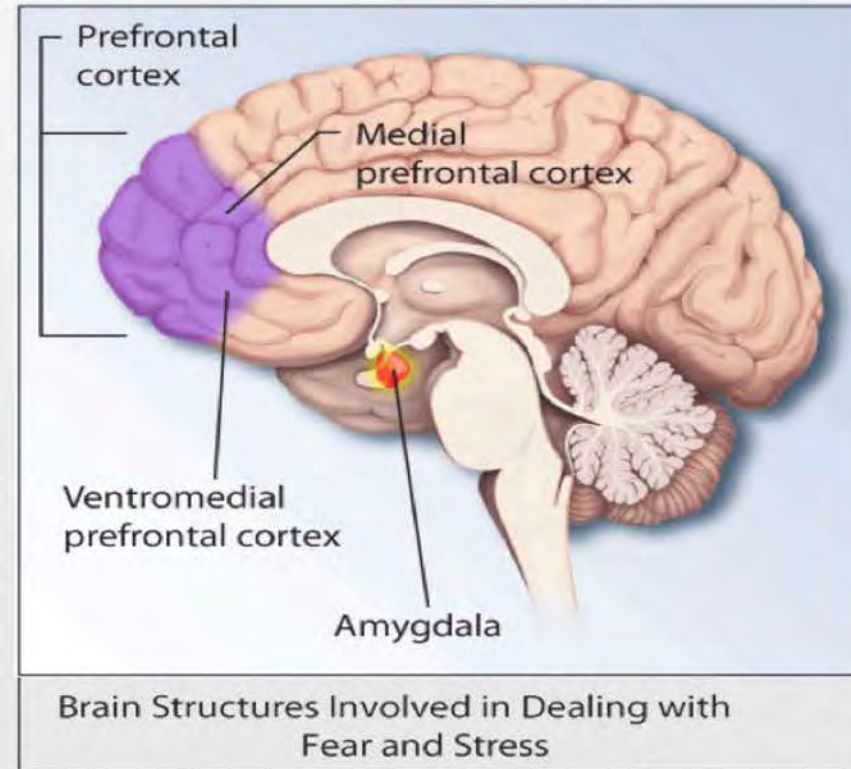
Neurons that

FIRE TOGETHER
WIRE TOGETHER

Neurons that fire out of sync,
fail to link

Effects of trauma on the brain

- Damages the neural wiring of the brain
- Increases an individual developing mental and physical illnesses
- Increases aggression
- Language failure
- Asthma
- Epilepsy
- Diabetes
- Immune system dysfunction



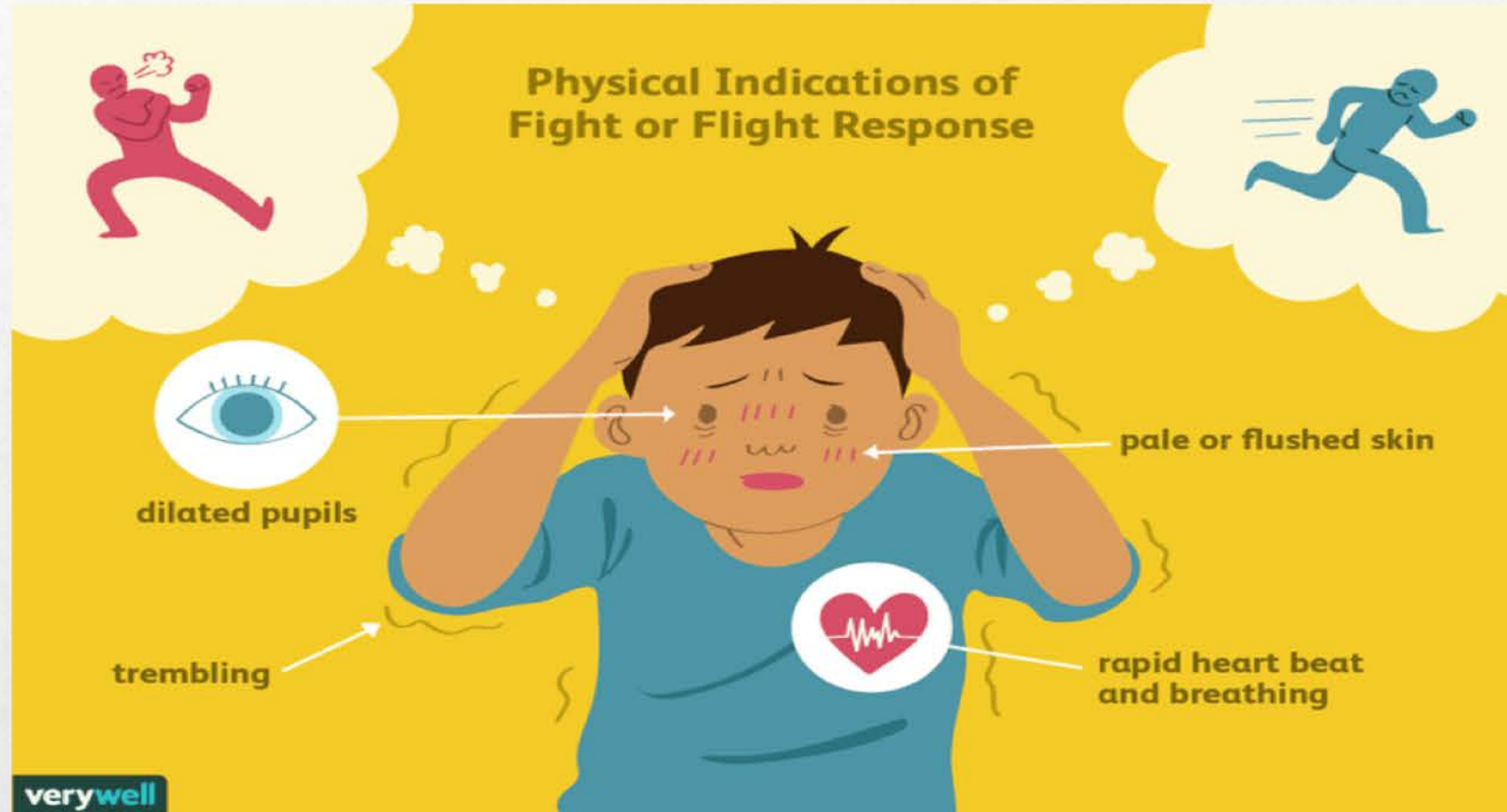
Our bodies are designed to remember danger



Each of us begins to maintain a database of threats in the environment.

ANCIENT SURVIVAL RESPONSES TO LIFE THREATENING CIRCUMSTANCES

Miller (2011)



Social effects of trauma

All of these conditions are correlated with stress in children that manifests as brain damage

- Poverty
- Violence
- Sexual abuse
- Family disruption
- Substance abuse and dependency
- Too little emotional support
- Low educational level
- Lack of commitment to parenting
- Lack of maternal maturity

Historical Trauma

- Historical trauma - Cumulative emotional and psychological wounding from massive group trauma across generations, including lifespan.

(Brave Heart, 1998, 1999, 2000)



A close-up photograph of a hand in a white shirt placing a domino into a line of other dominoes on a wooden surface. The dominoes are arranged in a line, with some already falling and others still standing upright. The background is blurred, showing the person's torso and arms.

What is “addiction”

“Is a complex condition, a complex interaction between human beings and their environment.” Gabor Mate’

Substance Abuse Disorders

span a wide variety of problems arising from substance use, and cover 11 different criteria:

- Taking the substance in larger amounts or for longer than you're meant to.
- Wanting to cut down or stop using the substance but not managing to.
- Spending a lot of time getting, using, or recovering from use of the substance.
- Cravings and urges to use the substance.
- Not managing to do what you should at work, home, or school because of substance use.
- Continuing to use, even when it causes problems in relationships.
- Giving up important social, occupational, or recreational activities because of substance use.
- Using substances again and again, even when it puts you in danger.
- Continuing to use, even when you know you have a physical or psychological problem that could have been caused or made worse by the substance.
- Needing more of the substance to get the effect you want (tolerance).
- Development of withdrawal symptoms, which can be relieved by taking more of the substance.

Factors in Substance Use Disorders

- *Susceptible organism (the human being)*
- *A drug with abuse potential*
- *Stress*



The question is
never ‘why the
addiction’

but

‘why the pain’

In the Realm of the Hungry Ghosts:
Close Encounters with Addiction



Gabor Mate', MD

What works

Research has shown the most affective treatment providers are:

- Those who are fluent in many theories and models of treatment.
- Who are client centered/counselor driven.
- Focus on strengths and protective factors
- Who are able to develop trusting therapeutic relationships.
- Who are work within their area of expertise.

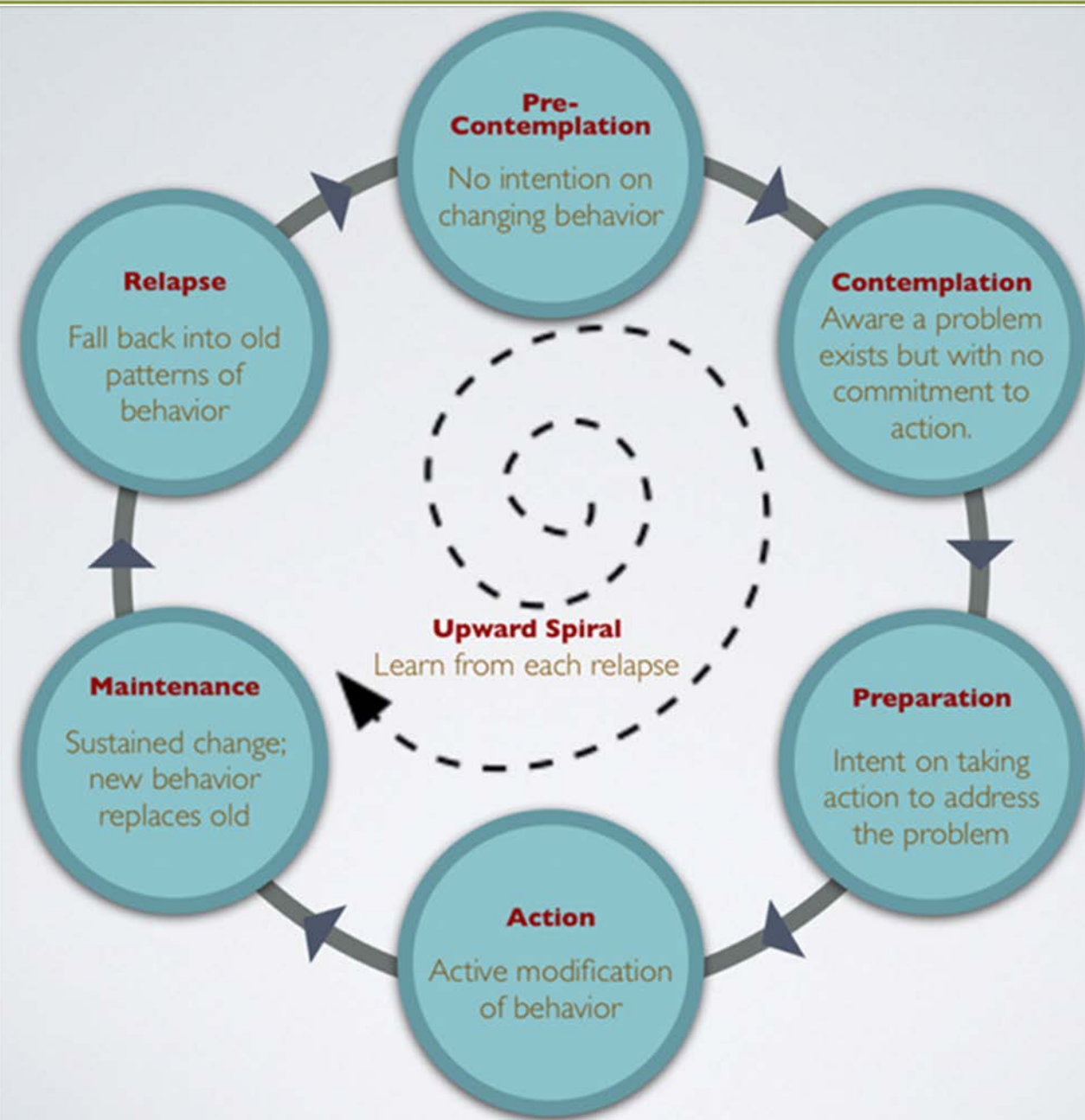
Harm Reduction

“It’s important
to meet people
where they’re
at, but not
leave them where
they’re at.”

Stages of Change

The goal of Stages of Change is to motivate the client to move from one stage to the next:

- Pre-Contemplation-Unaware or unwilling to even consider change
- Contemplation-Open to information, ideas, opinions characterized by ambivalence
- Determination/Preparation-Getting ready to try out new behaviors
- Action-Taking actual steps toward new behavior
- Maintenance-Has engaged in new behavior for at least 6 months
- Relapse-Debrief



Do not despair!!!

- Our brains are resilient organs
- Some important circuits continue to develop throughout our entire lives
- They may do so even in the case of persistent and chronic substance dependency
- Be patient with science, we are continuing to learn more about this complex human conduction and how to intervene



Discussion & Troubleshooting

- *What are your best practices around Tribal Opioid Response?*
- *What are your goals?*
- *What are your barriers?*
- *What questions do you have around developing your Tribal Opioid Response?*

Thank You for Attending...

Join us next month for the March Indian Country Opioid Response Community of Learning session, on May 9th, from 10am – 11:30am.

This session's didactic presentation topic will be "Introduction to 'Zero Overdoses' Training".

Thank you for joining us!

****If you are part of the NW TOR Consortium, please stay on the line for our monthly call.**